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PTO/SB/31 (02/01)
Approved for use through 10/31/2002. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**NOTICE OF APPEAL FROM THE EXAMINER TO THE
BOARD OF PATENT APPEALS AND INTERFERENCES**

Docket Number (optional)
HUIP-P01-060

AUG 07 2002

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#39

In re Application of Baron et al.	
Application Number 09/021660	Filed February 10, 1997
For METHODS FOR MODULATING HEMATOPOIESIS AND VASCULAR GROWTH	
Group Art Unit 1646	Examiner C. Kaufman

Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.

The fee for this Notice of Appeal is (37 CFR 1.17(b)) **\$ 320.00**.

- Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half and the resulting fee is: **\$ _____**.
- A check in the amount of the fee is enclosed.
- Payment by credit card. Form PTO-2038 is attached.
- The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. **18-1945**. I have enclosed a duplicate copy of this sheet.
- A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.

I am the

- applicant /inventor
- assignee of record of the entire interest.
See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)
- attorney or agent of record.
- attorney or agent acting under 37 CFR 1.34(a).

Signature

David P. Halstead, Ph.D.

Typed or printed name

July 22, 2002

Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

*Total of **1** forms are submitted.

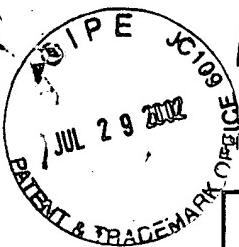
I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: Commissioner for Patents, Washington, DC 20231, on the date shown below.

Dated: _____ Signature: _____ (Farah Zafar)

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PTO/SB/21 (04-02)

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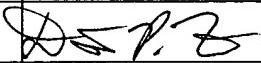
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	09/021660
		Filing Date	February 10, 1998
		First Named Inventor	Margaret H. Baron
		Group Art Unit	1646
		Examiner Name	C. Kaufman
Total Number of Pages in This Submission	4	Attorney Docket Number	HUIP-P01-060

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below)
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual Name	ROPES & GRAY David P. Halstead, Ph.D.
Signature	
Date	July 22, 2002

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FEE TRANSMITTAL
for FY 2002

Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT	(\$) 320.00
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Complete if Known

Application Number	09/021660
Filing Date	February 10, 1998
First Named Inventor	Margaret H. Baron
Examiner Name	C. Kaufman
Group Art Unit	1646

COPY OF PAPERS
ORIGINALLY FILED**METHOD OF PAYMENT (check all that apply)**

Check Credit Card Money Order Other None

 Deposit Account

Deposit Account Number **18-1945**

Deposit Account Name **Ropes & Gray**

The Commissioner is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Credit any overpayments

Charge any additional fee(s) during the pendency of this application

Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEES CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)
105	130	205	65
127	50	227	25
139	130	139	130
147	2,520	147	2,520
112	920*	112	920*
113	1,840*	113	1,840*
115	110	215	55
116	400	216	200
117	920	217	460
118	1,440	218	720
128	1,960	228	980
119	320	219	160
120	320	220	160
121	280	221	140
138	1,510	138	1,510
140	110	240	55
141	1,280	241	640
142	1,280	242	640
143	460	243	230
144	620	244	310
122	130	122	130
123	50	123	50
126	180	126	180
581	40	581	40
146	740	246	370
149	740	249	370
179	740	279	370
169	900	169	900
Other fee (specify)			

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 320.00)

**or number previously paid, if greater; For Reissues, see above

SUBMITTED BY**Complete (if applicable)**

Name (Print/Type)	David P. Halstead, Ph.D.	Registration No. (Attorney/Agent)	44,735	Telephone	(617) 951-7615
Signature			Date	July 22, 2002	

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